PTO/SB/06 (08-03)

Approved for use through 7/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMEDIA

, , <u>, , , , , , , , , , , , , , , , , </u>	Inder the Pap	erwork Re	duction A	ct of 199	5, no per	sons are	required to so		J.S. Patent a	Approv and Trademar	red for us k Office: (e thr	ough 7/31/2006	OMB 0651-0	
U.S. Patent and Trademark Off PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Feer DTO COME.											unless it	ass it displays a valid OMB control numb			
Substitute for Form PTO-875											13	Application or Docket Number			
CLAIMS AS FILED - PART I														194	
(Column 1) (Column 2) SMALL ENTITY												20	ОТН	ER THAN	
FOR NUMBER FILED										CC CIVILITY		OR	SMAL	L ENTITY	
BAS (37	SIC FEE CFR 1.16(a))					NUMBER EXTRA		4	RATE	FEE			RATE	CC.	
TO	TOTAL CLAIMS							_	1	s	Π,)R		FEE	
	(37 CFR 1.16(c)) INDEPENDENT CLAIMS			minus 20 =				7	x s		一'	<i>,</i> , ,		<u> </u>	
(37	(37 CFR 1.16(b))			minu	s 3 =			┨╷		-	\dashv	R	× \$=		
MUL	MULTIPLE DEPENDENT OF							-	x s	<u> </u>	。	R	x s=		
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))									.	١,	R	+5 =	1	
* If the difference in column 1 is less than zero, enter "0" in column 2.									Toru		┦ Ĭ	••	+5=	 	
ISTAL									L	_ _ °	R	TOTAL			
CLAIMS AS AMENDED - PART II															
		(Col	umn 1)		(C	olumn 2)	(Column 3)				, _	_	OTHE	S = 1.4.4.	
∢		C	LAIMS	T		GHEST	(Column 3)	ת ר	SMALI	ENTITY	0	R	SMALL	R THAN ENTITY	
티티			AAINING FTER		NU	IMBER VIOUSLY	PRESENT	\mathbf{I}	RATE	ADDI-		ſ			
녣	Total	AME	NDMENT	 	PA	D FOR	EAIRA	11		TIONAL	1	- [RATE	ADDI- TIONAL	
[<u>[</u>	(37 CFR 1.16(c))		233	Minus		300 2		7 F		FEE	┪	ŀ		FEE	
AMENDMENT	Independent (37 CFR 1.16(b))	. 6		Minus	A		= 1	1 F	x \$=		OR	L	x \$=	36	
₽	FIRST DOCCE	, C) -	Ь	T	四 叶		1	× \$=		OR	-	x s_ =	88/	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							11.	+; =		OR	Γ		<u> </u>	
							-	TOTAL	 	- I OK	_	+ \$ = TOTAL			
		(Calu	41					,	ADD'L FEE	L	OR		ADD'L FEE	12470	
<u>ω</u>	(Column 1) —(Column 2) (Column 3) CLAIMS HIGHEST											-	-		
		REMA	AINING TER.	1	NU	ABER	PRESENT		RATE:		7	. [****	
W.		AMEN	DMENT			OUSLY	EXTRA	11	79-10-	= ADDI- TIONAL			RATE	ADDI-	
&L	Total 37 CFR 1.16(c))	.		Minus	••	•		-		FEE	-	· _		FEE	
EN C	ndependent 37 CFR 1.16(b))	1		Minus	•••			×	\$ <u>=</u>		OR	L×	s=		
SIL		L			l			×	S =		OR	T _x	s =		
1,	IRST PRESENT	TATION OF	MULTIPLE	DEPEND	ENT CLAIN	4 (37 CF	R 1.16(d))	1.	\$ =		1				
								T	OTAL		OR	Ļ	S=		
								Al	DD'L FEE		OR		DD'L FEE	ŀ	
		(Colum			(Colu		(Column 3)						L.,		
의		REMAI	NING		HIGH NUM	BER	PRESENT		D475			_			
		AFT AMEND	ER MENT	- 1	PREVIC	USLY	EXTRA	-	RATE	ADDI- TIONAL		l	RATE	ADDI-	
<u>چ</u> اچ	Total CFR 1.16(c))	•		Minus	PAID	-OK		-		FEE		L		TIONAL FEE	
2 10	dependent	•	+	Minus	***			X S	<u> </u>	ı	OR	x:	s =		
AMENDMENT	CFR 1.16(b))						•	Ix:	=						
FIF	ST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(d))									OR	× 1				
							(0)/	L+5			OR	+			
• If t	he entry in col	lumn 1 is I	ass than	the coto:	in n='			AD	TAL D'L FEE	l	OR	TO	TAL D'L FEE		
** If t	he "Highest N	umber Pr	eviously P	aid For	n THIS S	2, write PACE is	"0" in column 3. less than 20, er	ntor **?				710			
The	Highest Nu	mber Prev	iviously Pai	aid For' II id For' (Ti	VITHIS S	PACE is	less than 20, er less than 3, ente it) is the highest	er "3".						[
: mllac	tion of inform	- 47 - 1			2		iv io ine filanest	numbe	or found in th					- 1	

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the INSPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.